

# Law Enforcement Officer Safety Act FIREARMS SAFETY COURSE INSTRUCTOR

## APPLICATION FOR CERTIFICATION

In accordance with the provisions of **515 CMR 6.00** I hereby make application for certification as a Law Enforcement Officer Safety Act Firearms Instructor.

Name \_\_\_\_\_  
(Last) (First) (MI) (D.O.B.)

Residence \_\_\_\_\_  
(Street and Number) (City or Town) (State) (Zip Code)  
(Telephone) \_\_\_\_\_

LTC Number \_\_\_\_\_ City/Town \_\_\_\_\_ Date of Issue \_\_\_\_\_ Expiration Date \_\_\_\_\_

Has your LTC or FID Card ever been suspended or revoked? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes explain the circumstances

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you hold any of the following?	Check
(a) A law enforcement or personal protection firearms instructor of the NRA, or other nationally recognized organization that teaches personal protection, practical handgun skills, and the proper use of force with a firearm or a firearms instructor certified by such organization.	
(b) A federal, state or municipal law enforcement firearms instructor.	
(c) A United States military firearms instructor.	
(d) A firearms instructor for the MPTC, or a firearms instructor certified by the MPTC.	
(e) A firearms instructor of a firearms manufacturer or its academy, or a firearms instructor certified by such academy.	

If you have answered yes to any of the above categories you must attach a copy of your certificate of completion with your application. If you do not hold status in any of the above categories, you still may receive certification as a LEOSA firearms instructor by providing documentation that you are competent to give instruction in a LEOSA Approved Firearms Course, such certification shall be at the discretion of the Colonel of the State Police.

\_\_\_\_\_  
Signature of Applicant Date

Certification is Valid for 10 Years. Mail application and supporting documentation to:

*Massachusetts State Police  
Firearms Licensing  
470 Worcester Road  
Framingham, MA 01702*